PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10065/34

1:

									11/6)	<u>/S</u>	<u> </u>	
		CLAIMS AS	FILED - (Column		(Column 2)		-	SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS			34				Г	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	,34 minus 20=		· /Y.			X\$ 9=		OR	X\$18=	250
INDEPENDENT CLAIMS			.3 mi	nus 3 =	*	-		X42=		OR	X84=	
MU	LTIPLE DEPEN	RESENT	ESENT						Un			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+140=		OR	+280=	
							TOTAL		OR	TOTAL	992	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							•	SMALL E	ENTITY	OR	OTHER SMALL	
		CLAIMS		HIGH			Г		ADDI-			ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	. 29	Minus	** 6	34			X\$ 9=		OR	X\$18=	_
	Independent	· 2	Minus	***	3	-		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDEN	CLAIM		١.	+140=.		OR	+280=	-
								TOTAL		OR	TOTAL	
		AD	DIT. FEE		J ~	ADDIT. FEE						
		(Column 1)		(Colu		(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Ш	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-	Ιſ	X42=		OR	X84=	•
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Ŭ.,		
BEST AVAILABLE COPY								+140=		OR	+280=	
								TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		-		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	RAN		-		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									υ π		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140= TOTAL		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE												
		nber Previously Pa					r found	in the app	ropriate box	in col	lumn 1.	